## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Au SS-200/-0/48

| Effective October 1, 2000              |  |   |                      |                               |                      |                  |    |                  |                   |                       |    |                            |                        |
|--|--|---|----------------------|-------------------------------|----------------------|------------------|----|------------------|-------------------|-----------------------|----|----------------------------|------------------------|
| CLAIMS AS FILED - PART i<br>(Column 1) |  |   |                      |                               |                      |                  |    |                  | SMALL ENTITY TYPE |                       | OR | OTHER THAN OR SMALL ENTITY |                        |
| TOTAL CLAIMS                           |  |   | 15                   |                               |                      |                  | Γ  | RATE             |                   | FEE                   |    | RATE                       | FEE                    |
| FOR                                    |  |   | NUMBER FILED         |                               | NUMBER EXTRA         |                  | E  | BASIC FEE        |                   | 355.00                | OR | BASIC FEE                  | 710.00                 |
| TOTAL CHARGEABLE CLAIMS                |  |   | / ) minus 20=        |                               | • &                  |                  | ľ  | X\$ 9=           |                   |                       | OR | X\$18=                     | James Stranger         |
| INDEPENDENT CLAIMS                     |  |   | 3 minus 3 =          |                               | ·                    |                  |    | X40=             |                   |                       | OR | X80=                       |                        |
| MU                                     | LTIPLE DEPEN   | DENT CLAIM PI                             | RESENT               |                               |                      |                  | l  | +135=            |                   |                       | OR | +270=                      |                        |
| * If                                   | the difference   | in column 1 is                            | ess than zero, enter |                               | "0" in column 2      |                  | L  | TOTAL            |                   |                       | OR | TOTAL                      | -14h                   |
| CLAIMS AS AMENDED - PART II            |  |   |                      |                               |                      |                  |    | IOIAL            | - L               |                       | UH | OTHER                      | THAN                   |
|  | · ·  | (Column 1)                                | MICIADED             | (Colu                         |                      | (Column 3)       |    | SMAL             | L EN              | ITITY                 | OR | SMALL E                    |                        |
| AMENDMENT A                            |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                      | HIGH<br>NUM<br>PREVIO<br>PAID | IEST<br>BER<br>OUSLY | PRESENT<br>EXTRA |    | RATE             | T                 | ADDI-<br>IONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                | **                            |                      | =                |    | X\$ 9=           |                   |                       | OR | X\$18=                     |                        |
|  | Ind pendent  | *   | Minus                | ***                           |                      | =                | 丨  | X40=             | 1                 |                       | OR | X80=                       |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                      |                               |                      |                  |    |                  | ╅                 |                       |    | 070                        |                        |
|  |  |   |                      |                               |                      |                  | L  | +135=            |                   |                       | OR | +270=<br>TOTAL             |                        |
|  |  |   |                      |                               |                      |                  | A  | TOTA<br>DDIT. FE |                   |                       | OR | ADDIT. FEE                 |                        |
|  |  | (Column 1)<br>CLAIMS                      |                      | (Colu                         | mn 2)<br>IEST        | (Column 3)       | _  |                  |                   |                       |    |                            |                        |
| MENDMENT B                             |  | REMAINING<br>AFTER<br>AMENDMENT           |                      | NUM                           | IBER<br>OUSLY        | PRESENT<br>EXTRA |    | RATE             | T                 | ADDI-<br>IONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | •   | Minus                | **                            |                      | =                |    | X\$ 9=           | :                 |                       | OR | X\$18=                     |                        |
|  | Independent  | *   | Minus                | ***                           |                      | =                | Ì  | X40=             | 1                 |                       | ΩĐ | X80=                       |                        |
| ⋖                                      | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                      |                               |                      |                  | H  |                  | +                 |                       | ОН |                            |                        |
|  |  |   |                      |                               |                      |                  | L  | +135=            |                   |                       | OR | +270=                      |                        |
|  |  |   |                      |                               |                      |                  | Al | TOTA<br>DDIT. FE |                   |                       | OR | TOTAL<br>ADDIT. FEE        |                        |
|  | ar hije ye. e  | (Column 1)<br>CLAIMS                      |                      | (Colu                         | mn 2)<br>IEST        | (Column 3)       | _  |                  |                   |                       |    |                            |                        |
| AMENDMENT C                            |  | REMAINING<br>AFTER<br>AMENDMENT           |                      | NUM<br>PREVI                  | BER<br>OUSLY<br>FOR  | PRESENT<br>EXTRA |    | RATE             | TI                | ADDI-<br>IONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                | **                            |                      | =                |    | X\$ 9=           |                   |                       | OR | X\$18=                     |                        |
|  | Independent  | *   | Minus                | ***                           |                      | =                |    | X40=             | -                 |                       |    | X80=                       |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                      |                               |                      |                  |    |                  | <b>-</b>          |                       | OR |                            |                        |
| +135=                                  |  |   |                      |                               |                      |                  |    |                  |                   |                       | OR | +270=                      |                        |
| •••                                    | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                      |                               |                      |                  |    |                  |                   |                       |    |                            |                        |